

Attachment G

FOCUS AREA G: EDUCATION AND TRAINING

Focus Area G includes one **Critical Capacity**:

A. Education and Training

Focus Area G also includes two **Enhanced Capacities**:

B. Community Readiness Through Training Opportunities

C. Evaluation of Training Effectiveness

Each Focus Area includes Critical Capacities, which are the core expertise and infrastructure that should be implemented as soon as possible to enable a public health system to prepare for and respond to bioterrorism, other infectious disease outbreaks, and other public health threats and emergencies. Some of the Critical Capacities include Critical Benchmarks, which recipients are required to complete prior to submission of the work plan (see Notice of Cooperative Agreement Award). Further, some Critical Capacities have associated with them Activities That May be Considered. Though not exhaustive, these lists provide examples of related activities that applicants may propose to develop to augment the relevant Critical Capacity.

For each Critical Capacity, the work plan must provide: (a) a brief description of the existing capacity in your jurisdiction, (b) an assessment of whether this capacity is adequate, and (c) where you judge the capacity inadequate, a proposal for effecting improvements during this budget period--including a timeline to guide implementation, measurable milestones to facilitate accountability, and a proposed budget. This document should not exceed 5 pages.

Some Focus Areas also include Enhanced Capacities, which are the additional expertise and infrastructure--i.e., over and beyond the Critical Capacities--to enable public health systems to have optimal capacities to respond to bioterrorism, other infectious disease outbreaks, and other public health threats and emergencies. Enhanced Capacities should be addressed only after Critical Capacities have been achieved or are well along in development. Recipients are encouraged to choose among these suggested activities or propose other comparable ones.

For each Enhanced Capacity that the recipient chooses to address now, the work plan must include a brief proposal for effecting the intended enhancements during this budget period--including a timeline to guide implementation, measurable milestones to facilitate accountability, and a proposed budget. This document is not to exceed 5 pages.

Recipient Activities:

- A. CRITICAL CAPACITY: to ensure the delivery of appropriate education and training to key public health professionals, infectious disease specialists, emergency department personnel, and other healthcare providers in preparedness for and response to bioterrorism, other infectious disease outbreaks, and other public health threats and emergencies, either directly or through the use (where possible) of existing curricula and other sources, including schools of public health and medicine, academic health centers, CDC training networks, and other providers.
1. Prepare a timeline to assess training needs--with special emphasis on emergency department personnel, infectious disease specialists, public health staff, and other healthcare providers.
(CRITICAL BENCHMARK #14)
 2. Assess the existing capacity to conduct training needs assessment and planning for public health and private professionals, and to provide access to training in bioterrorism, other infectious disease outbreaks, and other public health threats and emergencies. **If necessary, make improvements during this budget cycle.**
 3. Develop an ongoing plan for meeting training needs through multiple sources.
 4. **Develop the capacity at the state and/or local public health agency to facilitate or provide education and training sessions and services on bioterrorism, other infectious disease outbreaks, and other public health threats and emergencies. This should include a trained distance learning coordinator and access to distance learning capabilities in the form of an identified location to receive satellite broadcasts and a higher level of Internet connectivity, video, and imaging capacity to view live feeds.**
 5. Develop formal partnerships with schools of public health and medicine, other academic institutions, and other organizations for the provision of education and training.

6. Ensure educational expertise and review of training program content and curricula by:
 - a. developing/providing training for a speakers' bureau;
 - b. providing training in core public health skills to program staff; and
 - c. supporting costs (travel and course fees) for training critical program staff using existing courses
- B. ENHANCED CAPACITY: to ensure that public and private health professionals and other members of the community are identified in advance and can be effectively trained to mobilize and respond during a public health emergency.
 1. For the purpose of targeting education and training activities, develop and regularly update an online public health workforce inventory that lists all available manpower, including staff, contractors, community partners, private practitioners, academic partners, and other professionals with technical, clinical, cultural competence, and other skills and experience readily accessible to address public health threats and emergencies.
 2. For the purpose of identifying and addressing critical personnel shortages, with local public health agencies, conduct a staffing needs assessment which identifies the number, qualifications, and geographic distribution of public health personnel required to meet state and local public health service needs, with special focus on key professional shortage areas for bioterrorism and other events that are not addressed elsewhere, including public health nursing, behavioral science, toxicology, veterinary medicine, public health informatics, health/risk communication, public health law, public information/media relations, logistics management, public health leadership, management, and administration.
 3. Based on the findings of the staffing and training needs assessments, and with local public health agencies, develop and annually update a workforce

preparedness plan. Components of this plan should include (but are not limited to) strategies to address shortage areas, recruitment and succession, and surge capacity.

- C. **ENHANCED CAPACITY:** to provide directly or through other organizations the ongoing systematic evaluation of the effectiveness of training, and the incorporation of lessons learned from performance during bioterrorism drills, simulations, and events.
1. Implement incentive strategies to ensure workforce competency. Specifically, conduct a formal professional competency review on an annual basis to ensure that staff are fully trained and cross-trained using an all-hazard approach, and that personnel in regulated professions meet prescribed competencies (including certifications, licenses, and education required by law or recommended by local, state, or federal policies and procedures).
 2. Evaluate the effectiveness of training and education programs on individual staff using formal pre- and post-test instruments, practice-based skill reviews, peer observations, and other scientifically validated and relevant health education tools.
 3. Conduct an annual evaluation of all activities undertaken in support of the workforce preparedness plan using formal measures and indicators identified in the National Performance Standards Program.
 4. Collect data to develop and strengthen the relationship of workforce performance, organizational effectiveness, and health outcomes.

CDC Activities:

- E. Provide expertise, consultation, and technical assistance on all components of professional education and training.
- F. Facilitate the transfer of information via workshops, conferences, satellite broadcasts, and other means.
- G. Facilitate the provision of bioterrorism and competency-based core skills training and continuing education based on the needs identified through the state and local Workforce Training Assessment, both directly through the Public Health Training Network, National

Laboratory Training Network, and other sources, and through partnerships with outside organizations, including the national Centers for Public Health Preparedness, national public health and medical associations, and other organizations.

- H. Maintain the *Training and Continuing Education Online System* for accreditation of training programs and a database of continuing education credits for participants (see www.phppo.cdc.gov/phtnonline).
- I. Provide model workforce development plans, guidelines, and other resources for guidance, use, or customization by state and local public health officials.
- J. Partner in the full implementation of the National and Global Public Health Workforce Implementation Plan.
- K. Partner in the conduct of formative research and evaluation of the public health workforce, and serve as an information resource for findings from national and other studies.
- L. Provide updates on federal legislation, regulation, policies, and procedures impacting the public health workforce.